P	R	0	O	F	0	F	C	0	RF	RΕ	C.	TI	0	N	(S))
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FACILITY NAME			FACILITY NO.		LICENSING EVALUATOR				
This form shall be used in cor	niunction with the	Licensina F	L Report (LIC 809	and is	provided to the f	acility to verify	the correction		
		•		•	•				
of deficiency(ies) cited in a lic form will not prohibit the Lice	nsing Evaluator fr	rom conduc	tina follow-un	visits to	(DATE)	ciencies are co	rrected (See		
instructions on back of this for	-	om conacc	ang ronow ap	viole to	ondare that done	sionolog are ec	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
DEFICIENCY(IES)			PROOF OF CO	F OF CORRECTION					
SECTION NUMBER	PICTURE	RECEIPT	PHOTOCOPY		ERTIFICATION	OTHER	DATE CORRECTED		
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
I certify, under penalty of per corrected all deficiencies above				ia, that	the above is true	and correct a	and that I have		
SIGNATURE OF LICENSEE/FACILITY REPRESENTATIVE							DATE		
*Certification - this box may be this form, the licensee is self-the name(s) of the individual(substice in the "Date corrected"	certifying that the o	corrections	have been ma	de. If th	ne certification is r	elated to finge	rprints, include		

PLEASE RETURN THIS FORM WITH YOUR PROOF OF CORRECTION(S)

INSTRUCTIONS TO LICENSEE

- 1. Complete top portion of form self explanatory.
- 2. Under the DEFICIENCY(IES) COLUMN, list the regulation section number that was violated in the order indicated on the corresponding Licensing Report.
- 3. Under the PROOF OF CORRECTION COLUMN, CHECK the box that is appropriate to your proof of correction(s), e.g. receipts, photos, copy of records, or self certifying the deficiency(ies) have been corrected.
- 4. Under the DATE CORRECTED COLUMN List the date the deficiency was corrected. This column should not be completed until the deficiency is corrected.
- 5. After the above deficiency(ies) has been corrected, please attach the documentary evidence of correction(s), complete and sign the form. Mail/return the completed form and attachments to the licensing agency identified on the corresponding Licensing Report by the latest plan of correction date for all the deficiencies.